

Issue Classification

(Assistant Examiner) (Date)

LIEN M. NGO
PRIMARY EXAMINER

Total Claims Allowed:

O.G.
Print Claim(s)

O.G.
Print Fig.

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant						<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47		
Final	Original		Final	Original		Final	Original		Final	Original		
1	(1)			31			91			151		181
2	2			32			92			152		182
3	3			33			93			153		183
4	4			34			94			154		184
5	5			35			95			155		185
	6			36			96			156		186
	7			37			97			157		187
	8			38			98			158		188
	9			39			99			159		189
	10			40			100			160		190
	11			41			101			161		191
	12			42			102			162		192
	13			43			103			163		193
	14			44			104			164		194
	15			45			105			165		195
	16			46			106			166		196
	17			47			107			167		197
	18			48			108			168		198
	19			49			109			169		199
	20			50			110			170		200
	21			51			111			171		201
	22			52			112			172		202
	23			53			113			173		203
	24			54			114			174		204
	25			55			115			175		205
	26			56			116			176		206
	27			57			117			177		207
	28			58			118			178		208
	29			59			119			179		209
	30			60			120			180		210